

**Attachment 4**

DEC 11 2001

K 013890

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**510(k) Summary**

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**Surgical Dynamics Meniscal Staple**

United States Surgical  
150 Glover Avenue  
Norwalk, CT 06856  
USA

**DEVICE DESCRIPTION**

The currently marketed Surgical Dynamics Meniscal Staple is an absorbable implantable staple composed of a lactide/glycolide polymer. The staple consists of two rigid resorbable barbed legs connected by a length of resorbable, flexible braided filament. The staple is designed to facilitate meniscal repair in the vascular zone of the meniscus.

**INDICATIONS FOR USE**

The Surgical Dynamics Meniscal Staple is intended for the repair of vertical longitudinal full thickness tears (i.e., bucket-handle) in the red-red and red-white zones.

**SUBSTANTIAL EQUIVALENCE\***

The modified Surgical Dynamics Meniscal Staple was claimed to be substantially equivalent\* to the currently marketed version of the device. Information pertaining to this device was provided in the submission.

\*Any claim of substantial equivalence is made exclusively in regard to the U.S. Food, Drug and Cosmetic Act and should not be viewed in any other light.



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

Food and Drug Administration  
9200 Corporate Boulevard  
Rockville MD 20850

DEC 11 2001

Ms. Jenny Schuck  
Regulatory Affairs Senior Associate  
United States Surgical  
150 Glover Avenue  
Norwalk, Connecticut 06856

Re: K013890

Device Name: Surgical Dynamics Meniscal Staple

Regulation Number: 21 CFR 888.3040

Regulation Name: Smooth or Threaded Metallic Bone Fixation Fastener

Regulatory Class: Class II

Product Code: HWC

Dated: November 20, 2001

Received: November 23, 2001

Dear Ms. Schuck:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

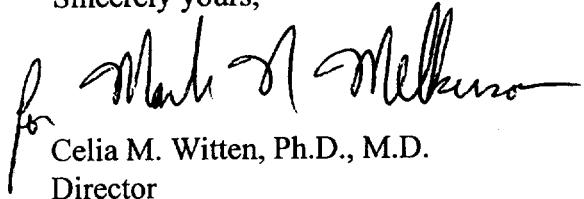
If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801 and additionally 21 CFR Part 809.10 for in vitro diagnostic devices), please contact the Office of Compliance at (301) 594-4659. Additionally, for questions on the promotion and advertising of your device, please contact the Office of Compliance at (301) 594-4639. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its Internet address  
<http://www.fda.gov/cdrh/dsma/dsmamain.html>

Sincerely yours,



Celia M. Witten, Ph.D., M.D.  
Director  
Division of General, Restorative  
and Neurological Devices  
Office of Device Evaluation  
Center for Devices and  
Radiological Health

Enclosure

## Attachment 2

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### Indications for Use Statement

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510(k) Number

K013890

**Device Name**

Surgical Dynamics Meniscal Staple

**Indications For Use**

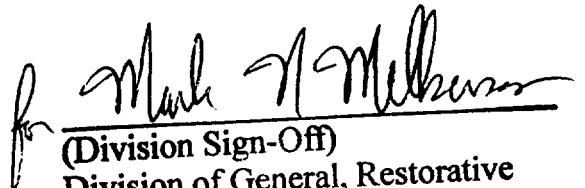
The Surgical Dynamics Meniscal Staple is intended for the repair of vertical longitudinal full thickness tears (i.e., bucket-handle) in the red-red and red-white zones.

(Please do not write below this line - continue on another page if needed)

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Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use: Yes OR Over-The-Counter Use: No  
(Per 21 CFR 801.109)

  
(Division Sign-Off)  
Division of General, Restorative  
and Neurological Devices

510(k) Number K013890